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As Thesis
On
Rheumatism
By
John Anglin
of Virginia

Paper March 27 1822

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Rheumatism

The Science of Medicine, though long left in comparative neglect and obscurity, when other sciences more cultivated with order and enthusiasm, has emerged from the obscure station which it once occupied, and assumed that rank which as a Science and Profession it so justly merits. And, indeed, what Science can be more useful or what Profession more honorable than that, which has for its immediate object, the relief of human pain and misery and the promotion of health, without which wealth and prosperity bring with them no charms, and life itself is a wearisome journey which affords but few objects to delight, and few occasions for happiness.

In no Country is there a wider field or fairer prospect presented, than in our own, for the

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exercise of the talents of those, who are ambitious of becoming useful or eminent in the Profession. Living in a country, the vast extent of whose tendency embraces almost every diversity of climate; and visited by almost every malady in the Catalogue of disease, marked by peculiar violence and intractability; surrounded, too, by almost every article in the Materia Medica, growing in luxuriance, planted, by the hand of nature, or naturalized by the care of man, surely, if there is a country where perfection can be approached in the Science of Medicine, it is in this our happy land.

Conceiving it to be the duty of every man, who has in view the exercise of a Profession, to devote his time and attention more particularly to those parts of it, in which information will be most requisite when he comes to its practical application, I have selected Rheumatism as the subject of my Thesis, which, though, not the most fatal,

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yet, as consequence of the sudden vicissitudes and occasional inclemencies of our climate, is one of the most common and most painful of our diseases.

It is a subject, which has been so frequently handled, and so fully investigated, by men of the greatest talents and enterprize, that it would be difficult in the present enlightened state of the science of Medicine, even for the most experienced practitioner to add any thing of importance to what has already been written: but, it is one of such great importance, that I consider it the duty of every man of the Medical Profession to make himself perfectly acquainted with it. From these considerations, and not from the expectation of being able to advance any thing new, I was induced to select Rheumatism as the subject of my Thesis.

By all writers, so far as my knowledge extends, Rheumatism has been divided into two forms, or rather stages, The Acute and Chronic. These two stages

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are marked by considerable difference of symptoms, and require different modes of treatment for their cure.

Acute Rheumatism is distinguished by pains affecting the larger joints, such as the knee, hip, elbow, shoulder and loins. Most frequently the pain affects but few of these parts at the same time, but, frequently shifts its situation from one joint to another. Sometimes, however, several parts are affected at the same time. The pain, in this case, is generally succeeded by symptoms of Pyrexia, with a pulse full, frequent and hard. The febrile symptoms attendant on Rheumatism, suffer an exacerbation in the evening, and the pain shifting its situation from one joint to another becomes more intolerable at night. The disease, if not arrested by art, usually continues in this form, for a period in general not exceeding two or three weeks, when tumescence with redness supervenes, and the pain abates

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or is entirely relieved, and the patient remains exempt
till the exciting cause is again applied.

This is the most regular form the disease assumes,
and the form in which it most frequently makes
its appearance. It sometimes, however, makes its
attacks on very different parts of the system, and
is marked by various irregularities. Sometimes it
attacks the head, especially in children: It also
affects the skin, and very frequently the muscles,
which become painful on motion, and serve as a
medium through which pain is conveyed from one
joint to another. Rheumatism also affects the
Internal organs, as the heart and lungs, bearing
a strong analogy to retrocedent Gout, and has
been by some termed retrocedent Rheumatism.
There is sometimes a strongly marked affinity, be-
tween Rheumatism and Dysentery, the two diseases
frequently alternating with each other, and some have
even maintained that the latter disease is only a

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There are some diseases, with which Rheumatism may be confounded, and from which it is sometimes difficult to distinguish it. Of these, Gout is the one to which it bears the most striking resemblance, and in some cases, it is by no means easy to distinguish them. There is, however, in almost every instance, some characteristic marks by which each may be known. In the first place, the seat of the two diseases are different; the pain in Gout almost always affecting the smaller joints and especially those of the great toe; whereas in Rheumatism, the larger joints, and those especially, which are surrounded by many muscles, are most liable to be affected. Gout is primarily in affection of the stomach; Rheumatism of the extremities. Secondly, the Pyrexia in Rheumatism observes regular periods of exacerbation, which is most generally in the evening; The paroxysms of Gout

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are irregular in their return. Thirdly, The colour of the affected parts in the two diseases is different. In Acute Rheumatism it is of a deep red; in Gout it is of a brighter and more polished appearance. Fourthly. In Rheumatism the disease may in general be referred to a direct cause; in Gout, which is more insidious in its approach, and whose cause is more remote, we cannot with so much certainty. The other diseases with which Rheumatism is most apt to be confounded, are Scorbatic and Scrofulous affections. In order to distinguish it from these, we must inquire into the previous history and habits of the patient, and, in this way we may in almost every instance, ascertain the nature of the disease.

It is generally conceded, I believe, that sudden vicissitudes of heat and cold are the most common causes of Rheumatism, the disease being

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most prevalent in spring and autumn, when these changes are most frequent, and seldom occurring in uniformly warm or cold weather.

There are three circumstances which render the above cause more efficient in the production of the disease. First, When one part of the body is exposed to the influence of cold, whilst the rest is kept proternaturally warm. Secondly, When a part is exposed for a considerable length of time. Thirdly, when the application of cold is also combined with moisture. It is in this manner that the use of damp clothing proves one of the most common causes of Rheumatism.

There is another very frequent cause of the disease, namely, Marsh Miasmata, it being very prevalent in some sections of our country, exposed to its influence. In these cases the disease is of gastric origin, and, like most other diseases arising from the same cause, generally

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Rheumatism is also sometimes produced by sprains and other violence done to the joints.

These are causes to which persons of all ages and every temperament are alike subjected, but, like all other diseases of the inflammatory type, Rheumatism is most apt to affect those of the sanguine temperament and full habit, and usually makes its approach about the middle of life. It sometimes, however, makes its appearance even in infancy, and in these cases is most apt to attack the head. Neither is old age exempt from this disease.

Rheumatism, like Gout and Pulmonary consumption, appears to observe a hereditary disposition, being more apt to attack the members of one family, than those of another, though they be equally exposed to the influence of the causes which produce it. This is a fact which

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The inflammation in Rheumatism appears too, to be of a peculiar kind, and as much of a nature *Sui generis*, as in smallpox, lues venerea, or any other disease, called by common consent *Specific*. And seated in the fibrous tissue never terminates in suppuration, and but rarely in effusion.

Different opinions have been held, with regard to the seat and proximate cause of Rheumatism. It is, however, generally agreed at present, that the inflammation is primarily situated in the membranes which surround the joints, and in the tendons and aponeuroses of the muscles, which are more abundant about these parts: and add, the most common cause of the disease, acting on the joints, which are less covered and protected by cellular substance and muscles, produces inflammation upon the same principle.

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as in the other tissues, where it is the agent by which it is excited. The inflammation extending itself to the surrounding parts, causes a resolution, which, acting as a topical depletion from the vessels primarily affected, explaining why the pain is relieved or greatly mitigated on the accession of swelling.

Having, thus, given some of the most prominent symptoms, by which Rheumatism is marked, and the different forms, which it assumes, together with the marks by which it may be distinguished from other diseases to which it bears the strongest analogy, I shall next proceed to give that treatment, which experience has taught to be most successful in its cure. Many and various are the remedies, which, at different times been honoured with the name of specifics in this disease. But, they have all, either lost much of their reputation, or fallen into entire neglect. Denying to any particular medicine the power of complete control over this disease, I shall give

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these means of cure, most generally pursued, and which have been found most successful.

Very considerable difference exists between the mode of treatment pursued in this country, and that pursued in Europe. In England especially, it is customary, even, in the commencement of Acute Rheumatism, to resort to the use of bark and other tonics, and, in these they principally rely for the cure.

Whether this practice be found successful or not as the disease appears there, quite a different one, is required and pursued in this country. In Acute Rheumatism, where the Pyrexia is considerable, with a pulse full, frequent, and hard, and pain in the joints considerable, no practitioner in this country, hitherto, has prescribed Venesection, as the most powerful means of subduing the urgent symptoms of the disease. It is frequently necessary to repeat this operation, and in some cases to urge it to a very great degree, before the febrile symptoms can be subdued,

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and the disease eradicated. In the cure of Acute Rheumatism, this remedy should not be desisted from till a decided impression is made upon the disease; till this is effected, all other remedies, will prove inefficient or hurtful. Some have objected to the liberal use of the lancet, from a fear that debility thus induced, is a frequent cause of the Acute form of the disease being converted into the Chronic, or of its receding and falling upon some internal Organ more essential to life, and thus be more apt to prove fatal. These apprehensions, according to Caldwel are groundless; Chronic Rheumatism, when it follows acute, depends on quite a different cause, viz. suffering the febrile symptoms to remain unsuppressed in the system, and, after it has been supposed that the disease was entirely eradicated, it manifest itself in the Chronic form.

Next in importance to remission in the cure of Rheumatism, is the use of Diaphoretics. They should not,

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however, be resorted to till arterial action has been maintained by resuscitation, and, even then, those of the mildest should be preferred. If resorted to too early, or, if articles of a stimulating nature be selected, they never fail to aggravate the symptoms. For the purpose of exciting diapnoesis, Antimonials alone, or in combination with Ipecacuanha or Opium, or in the form of Parris Powder are generally selected on account of the mildness of their action and certainty of their effect.

The bowels being generally in a constipated state in acute Rheumatism, and the Stomach and Intestines in a state of irritation, evacuations are of great importance. There is, however, an objection of considerable magnitude to the use of active purging in this disease, namely, the motion which is rendered necessary, and, which must necessarily give the patient pain and perhaps aggravate the inflammation.

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In addition to the above general means of which I have spoken, there are also some local applications, which are sometimes eminently useful. The most important of these is the use of Cupps, leeches, blisters, frictions. Leeches are in general preferable to cupps, on account of the greater facility with which they may be applied to the parts generally affected in Rheumatism. Greater quantity of blood may be abstracted by them also, and sometimes afford great and almost immediate relief.

Blisters, when the febrile symptoms have been subdued, and the pain confined, may be used with great advantage. But, if they are resorted to too early, they seldom fail to aggravate the disease, and little benefit is to be derived from them, while the pain is still shifting its situation from one part to another.

Chronic Rheumatism, is sometimes the consequence of Acute Rheumatism, imperfectly cured, and, some

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times arises as an original disease, in the latter case, the local irritation not being sufficient to produce those violent symptoms and constitutional derangement which manifest themselves in the acute form of the disease.

When after the febrile symptoms have ceased, and the redness and swelling have subsided, certain joints remain cold and stiff, which become painful in damp weather, and possess great sensibility to changes in the atmosphere; When the affected joints cannot be made to sweat, though a free and copious perspiration is induced over the rest of the body; when the pain is relieved by warm applications and aggravated by cold ones; and when the joints, particularly affected are those surrounded by many muscles, the disease is to be considered as Chronic Rheumatism, and, as such requires a modification of treatment.

This form of the disease being attended by an at-

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one state of the system, venesection is seldom required, and most generally is altogether inadmissible.

It is under these circumstances, that Diaphoretics prove eminently serviceable in the cure of Rheumatism. They act, not only by diminishing the circulating mass, but, by determining the circulation to the surface of the body, they relieve the vessels labouring under inflammation, which are thereby enabled to change their morbid action, for that which is natural and healthy. They are particularly serviceable in those cases attended with congestions, and should be much earlier resorted to, than under other circumstances.

With the view of exciting diaphoresis in chronic Rheumatism, articles of a stimulating nature should be resorted to, as those from which greatest benefit is to be derived.

In the first place, I shall speak of the *Juniperus Sabini* or *Savin*. Of the utility of this ar-

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tics in Rheumatism, we have the indisputable testimony of Dr. Chapman. As a powerful stimulant, it promotes all the secretions, increases the circulation, determines it to the surface, and produces a glow and gentle warmth on the skin, which was before cold and rigid. The Sarsaparilla seems particularly adapted to those cases where there is great coldness and rigidity of affected parts, and languor in the general circulation. Nor is it alone applicable to genuine Rheumatism, but, has also been used with decided advantage in that form of the disease which is the sequel of the venereal, called Syphilitic Rheumatism.

The next article of which I shall speak, and whose reputation is greater, and which is perhaps more extensively used than any other in chronic Rheumatism, is the Gum Guaiacum. There are two forms in which this medicine is generally used, the substance

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and tincture. The Volatile Tincture is the form generally preferred, and there is the strongest testimony in favour of its utility. It combines both stimulant and diaphoretic properties, and, when given in large doses also operates gently upon the bowels, in which case its utility is increased. To derive fullest advantage from it, it should be given in the dose of half an ounce, and, on an ounce in some instances, on going to bed, and its operation assisted by other means of producing diaphoresis.

^{Coriander & Anise}
The ~~Volatile Spirit~~ has also been much used in this disease. To obtain its full effects, it is directed to be exhibited in as large doses as the Stomach will bear, without producing nausea and gastric distress.

In addition to these, there are a great variety of articles, which have been employed in this disease, & in which great reliance is placed, in the present

day. Among them are the Sarsaparilla, Turpentine, Polygala senega, Oxide of Arsenic, Opium, Camphor and many others of the same nature. In fact almost every article which combines within itself the properties of a Stimulant and diaphoretic, may, under certain circumstances, be resorted to with advantage. They determine the circulation to the surface, and thus relieve the vessels labouring under disordered action, and a new and healthy action is induced.

The Cortex Peruvianum, though inadmissible in ordinary Rheumatism with increased vascular action, yet, there is one form of the disease which yields more readily to this remedy than any other. I allude to that arising from Marsh Effluvia. When arising from this cause, it usually assumes the intermittent or remittent form; and, after the alimentary canal has been previously evacuated, Bark may be administered with the greatest advantage. In cases, too, where there is great debility and weakness, and no re-

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means of the inflammatory disposition, Bath, as one of our most useful tonics, may serve to recruit the strength and confirm recovery.

There are some of the internal remedies, which have been found most useful in the cure of Chronic Rheumatism. There are also some external applications which may be resorted to with advantage, and which, in some cases, is almost indispensable to the cure. Amongst these are the cold and warm bath, frictions with a brush or some stimulating preparation, as the camphorated or volatile liniment, Blister, &c.

The warm bath often proves highly serviceable. The shower bath has also been highly extolled by some, and, when its application is succeeded by a glow and warmth, and relaxation of the surface, and disposition to perspiration, great advantage may be expected from its use. On the contrary, when it is followed by chilliness and depression

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it should be immediately abandoned as prejudicial.

Blisters, though sometimes useful in Acute Rheumatism, yet, it is in the Chronic that they most conspicuously display their powers. They act, both by depletion, and by exciting counter irritations, and are particularly applicable where the pain is fixed and stationary. They are to be applied as near the parts affected, as can be done conveniently, and should be frequently repeated.

Frictions with Tatarizet Ointment, moistened with water, by which itching and warmth is excited, and a peculiar eruption produced, is strongly recommended by Dr Caldwell.

The application of flannel rollers, with moderate tightness to the joints, has been highly recommended, and, by the support which they give, and the gentle and equable warmth which they maintain are no doubt highly useful.

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attracted considerable attention in this country,
 This is by an operation called *Acupuncture*.
 It is performed by introducing a needle with a
 rotatory motion, into the muscles and other parts
 affected, by which very inconsiderable pain is pro-
 duced, and almost instantaneous relief, has in
 many instances been afforded. I shall not attempt
 an explanation of the manner in which this ope-
 ration effects a cure, nor do I know that any
 plausible explanation has been given, but, if the
 anticipations of those whose experience has been most
 extensive, will be realized, we have reason to ex-
 pect that it will be a most valuable acquisition
 in the treatment of Rheumatism.

When all other remedies have failed, Dr. Baldell
 recommends us to resort to the use of Mercury.
 When carried to the extent of producing Saliva-
 tion, he says "the symptoms almost always give
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Whatever may be the mode pursued in the treatment of Rheumatism, a scrupulous regard should be had to regimen. In the Acute form of the disease it should be Antiphlogistic in the strictest sense of the word. Without regard to this point, all will perhaps prove alike unsuccessful. Though a more generous and nourishing diet may be allowed in Chronic Rheumatism. Yet, in this too, every article of a stimulating nature, should be prohibited, as it would increase the inflammation, and tend to cherish the disease.

Thus have I given the history of Rheumatism as it is laid down by those authors which I have read upon the subject, and as I think most commonly occurs in our country. I might have extended the list of remedies used in its treatment to a much greater length, but, I conceive I have enumerated those which will be found most important, and in fact, those which, with

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given are correct. I submit them to the scrutiny
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Some Records
on
Rheumatism

John P. Hill

Virginia

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